

529 Rec'd PCT/PTO 16 MAY 2000

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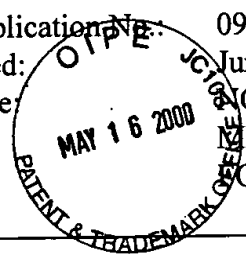
PATENT

Attorney Docket No.: VPHAR1460-2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Desai et al. Art Unit: Unassigned  
Application No.: 09/446,783 Examiner: Unassigned  
Filed: June 26, 1998

Title: NOVEL FORMULATIONS OF PHARMACOLOGICAL AGENTS,  
METHODS FOR THE PREPARATION THEREOF AND METHODS  
FOR THE USE THEREOF



CERTIFICATION UNDER 37 CFR § 1.8

I hereby certify that the documents referred to as enclosed herein are being deposited with the United States Postal Service as first class mail on this date 5/11/00 in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231

**Stephen E. Reiter**

**Reg. No. 31,192**

(Name of person mailing paper)

*Stephen E. Reiter*  
Signature

5/11/00  
Date

**Box Missing Parts**

Assistant Commissioner of Patents  
Washington, D.C. 20231

**RESPONSE TO THE NOTIFICATION OF MISSING REQUIREMENTS UNDER 35 U.S.C. 371 IN THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US)**

Sir:

In response to the Notification of Missing Requirements Under 35 U.S.C. 371 in the United States Designated/Elected Office mailed February 29, 2000 enclosed are:

1. A copy of the Notification of Missing Requirements Under 35 U.S.C. 371 in the United States Designated/Elected Office;
2. Two (2) executed copies of one (1) Declaration for Patent Application for the above-identified U.S. Patent Application;
3. An executed Power of Attorney by Assignee for the above-identified U.S. Patent Application;
4. A Recordation Form Cover Sheet and three (3) executed copies of one (1) Assignment for the above-identified U.S. Patent Application;

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102979-159179

In re Application of:  
 Desai et al.  
 Application No.: 09/446,783  
 Filed: June 26, 1998  
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PATENT  
 Attorney Docket No.: VPHAR1460-2

5. A Petition for Extension of Time;
6. Check No. 442403 in the amount of \$380.00 and Check No. 442456 in the amount of \$40.00; and
7. A postcard.


The filing fee has been calculated as shown below:

	Number Filed	=	Number Extra		Rate		=	Fee	
					Small Entity	Other Entity		Small Entity	Other Entity
Total Claims	65	=	45	X	\$9	\$18	=	\$0.00	\$ 0.00
Independent Claims	18	=	15	X	\$39	\$78	=	\$0.00	\$ 0.00
Multiple Dependent Claims Presented: ___ Yes <u>X</u> No					\$130	\$260			0
BASIC FEE								\$0.00	\$ .00
TOTAL FEE								\$0.00	\$ 0.00

X Enclosed is Check No. 442403 in the amount of \$380.00 to cover the two (2)-month extension of time and Check No. 442456 in the amount of \$40.00 to cover the Recordation of one (1) Assignment. Please charge any additional fees associated with the filing submitted herewith or credit any overpayment to Deposit Account No. 07-1895. A duplicate copy of this Transmittal Letter is enclosed.

Respectfully submitted,

Dated: 5/11/00

  
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